

#### Better Care, Lower Costs

Value-Driven Health Care

Carol Kelly
Director, Office of Policy
Centers for Medicare and Medicaid Services

### .... Anxiety About Health Care

- Employers: premiums growing at 2-3x wages; affecting profits and competitiveness
- Consumers: higher out-of-pocket costs keeping real wage growth down; fear of losing insurance; lack of information for confident decisions
- Insurers: pressure from employer customers to control rising costs
- Doctors and Hospitals: Medicare reimbursement rates; administrative challenges of data collection, performance measurement and reporting

## Our Society's Challenge

Sector not a system

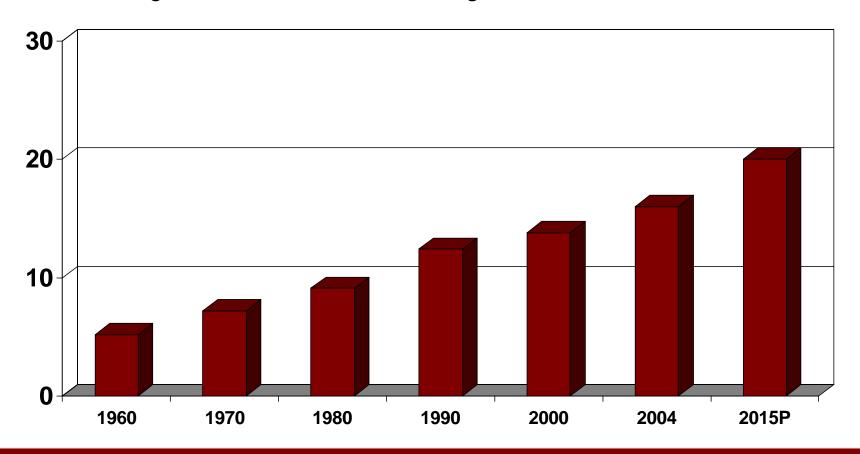






### Our Society's Challenge (cont.)

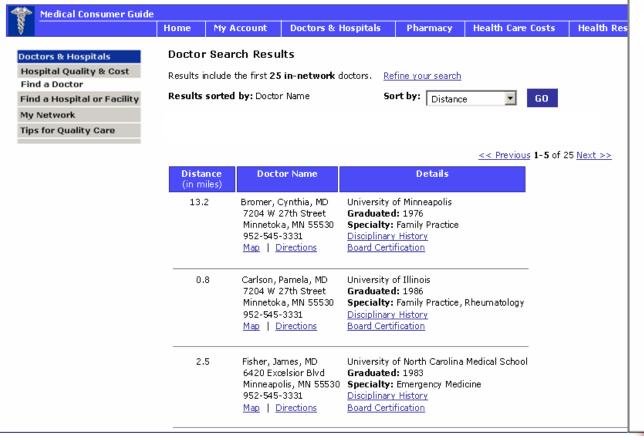
- Ever Rising Costs
  - Projected to hit 20% by 2015





### Our Society's Challenge (cont.)

#### Opaque Quality



#### Surgical Care Consumer Guide Search Results: Hip Replacement Summary Average Cost in Network Facility: \$11,249 \$18,889 Out of Network Facility: Results sorted by: Distance Distance **Facility Name** (Miles) Clearwater General 14280 Bay Drive Clearwater, FL 22131 13.2 All Saints Medical Center 123800 All Saints Drive Tampa, FL 22122 25.6 Good Samaritan Hospital 11111 E. Samaritan Drive Tampa, FL 22222 26.3 Tampa Hip Hospital 1400 East Tampa Boulevard Tampa, FL 22211 27.3 Orthopedic Clinical Hospital 1444 Goodie Drive St. Petersburg, FL 22113 33.2 Valley General Hospital 1400 Tampa Bay Way Tampa Bay, FL 22031

## .... Our Society's Challenge (cont.)

- Misaligned Incentives
  - Consumers
  - Providers
  - Political Interests

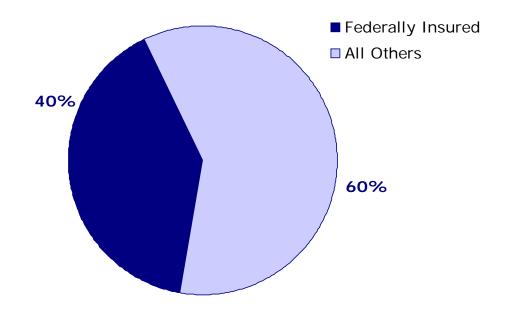
### Our Society's Challenge (cont.)

- U.S. health care market lacks
  - System to communicate
    - Electronic
    - Interoperable
  - Cost information
    - Consumer friendly
    - Episodes & individual services
  - Quality information
    - · Widely accepted
    - · Consumer friendly
  - Incentives to seek value
    - Consumers
    - Providers

#### **President's Executive Order:**

- Issued on August 22, 2006
- Committed Federal government agencies that sponsor health insurance programs (Medicare, DoD, Tricare) to the four cornerstones of value-driven health care:
  - 1. Commit to using interoperable Health IT standards
  - 2. Measure and publish quality information
  - 3. Measure and publish price information
  - 4. Provide incentives for quality and efficiency

- Welcome support and input from Industry
- Applaud AdvaMed Transparency Statement
  - Transparency must be rooted in accurate, timely and robust measures
  - Value is a function of quality and cost
  - Focus on episodes of care and consumer-friendly information
  - Quality and cost measures must be developed collaboratively by stakeholders
  - Importance of interoperable HIT and financial incentives



Federal efforts alone are not enough to tip the market toward transparency

- Building on the efforts of the private sector and partnerships, the Secretary is encouraging employers and other purchasers to commit to the four cornerstones of value-driven health care
- Secretary has developed an Employer Toolkit to aid employers and other purchasers to show their support
  - CEO Cover Letter
  - Statement of Support
  - Sample RFI
  - FAQs

### Statement of Support

#### What it is...

- Public declaration
- Not a legal document
- Commit now Implement as possible

### Statement of Support

### Declaring your support...

- Online submission is available at www.hhs.gov/transparency/employers
- Mail or Fax:

Department of Health and Human Services Value-Driven Health Care 200 Independence Avenue, SW Room 738G Washington, D.C. 20201 (ph) 202.205.5552 (fx) 202.205.7897 valuedriven@hhs.gov

## Collaboration is Key

#### National Coordination – Local Control:

#### **Network of Local Collaboratives**

- Community Leaders
  - Local multi-participant organizations in the early stage of development formed to advance the four cornerstones
  - Recognized by Secretary
- Value Exchanges
  - Local multi-stakeholder collaboratives of physicians, nurses, hospitals, health plans, employers, unions, and consumers
  - Focus on public reporting to improve quality and value in health care
  - Chartered by AHRQ
  - Participation in a Learning Network
  - More Advanced Value Exchanges that meet additional criteria may qualify to pool their data with Medicare data for broad-based measurement of provider performance and quality
- Better Quality Information to Improve Care for Medicare Beneficiaries Pilot Sites

### Do Value-Driven Payments Work

- CMS partnership with Premier, Inc.
  - Nationwide organization of not-for-profit hospitals
  - Members share information on quality and efficiency
- Financial incentives to improve quality, reduce complications, and save money
  - Public reporting on CMS website <u>www.cms.hhs.gov/HospitalQualityInits</u>
- Bonuses to top hospitals for each condition
  - Top decile given 2% bonus of their Medicare DRG payments for that condition
  - Second decile given a 1% bonus
- Top 50% of hospitals in each clinical area publicly acknowledged on CMS website

### Early Evidence Says Yes

#### Premier HQID Phase 1 - Results

- Results released November 14, 2005
- \$8.85 million awarded to 123 top performers
- Quality of care improved in all of the five clinical areas measured
- Top performers represented large and small facilities across the country

#### Just In – Phase 2 Results

- Results released January 26, 2007
- \$8.69 million awarded to 115 top performing hospitals
- Average improvement across five clinical areas was 6.7% for total gains of 11.8% percentage points over the project's first two years
- Three Year Extension Announced February 22, 2007



#### The Future

#### Surgical Care Consumer Guide Search Results: Hip Replacement What's included in the cost? Summary Average Cost in Network Facility: \$11,249 - \$15,895 \$18,889 - \$23,460 Out of Network Facility: **▼** GO Sort by: | Quality Results sorted by: Distance Cost: \$ Least Expensive | \$\$\$ Most Expensive | Patient Assessment: ★★★ Highest |★ Lowest Quality:★★★★ Highest | ★ Lowest Patients **Quality** Cost Estimate Insurer Patient Patient Assessment Distance Facility Name (Miles) per year Pays Pays of Care 6.2 Clearwater General \*\*\* \$\$ 85% 15% \*\* 400 14280 Bay Drive (\$2,384) \$15,895 (\$13,511)Clearwater, FL 22131 13.2 All Saints Medical Center \$\$\$ 80% 20% \*\*\*\* \*\*\* 123800 All Saints Drive \$20,700 (\$16,560) (\$4,140) Tampa, FL 22122 25.6 \*\*\*\* \$\$ 90% 10% \*\*\*\* Good Samaritan Hospital 232 11111 E. Samaritan Drive (\$1,590) \$15,895 (\$14,306) Tampa, FL 22222 26.3 Tampa Hip Hospital \*\*\* \$\$\$ 75% \*\*\* 170 25% 1400 East Tampa Boulevard \$20,700 (\$15,525) (\$5,175)Tampa, FL 22211 27.3 Orthopedic Clinical Hospital 432 70% 30% \$11,600 1444 Goodie Drive (\$8,700) (\$2,900) St. Petersburg, FL 22113 33.2 85% Valley General Hospital 310 \*\*\* \$\$ 15% \*\*\* 1400 Tampa Bay Way \$16,230 (\$13,796) (\$2,434) Tampa Bay, FL 22031



# The Future

ş	Home My	y Account	Doctors & Hospitals	Pharmacy	Health Care C	osts	Health Resourc
Doctors & Hospitals	Doctor Se	arch Result	s				
Hospital Quality & Cost Find a Doctor	Results inclu	de the first <b>25 i</b>	n-network doctors.	Refine your search	_		
Find a Hospital or Facility	Results sort	ted by: Doctor I	Name !	Sort by: Distance	. ▼	GO	
My Network	Key:						
Tips for Quality Care		<b>★★★</b> Highest	★ Lowest	Cost: \$ Least Exp	ensive   <b>\$\$\$\$</b> Mo	ost Expens	ive
	<< Previous 1-5 of 25 Next >>						
	Distance (in miles)		Name	Details		Quality	Cost
	13.2	7204 W 27 Minnetoka 952-545-3	Bromer, Cynthia, MD 7204 W 27th Street Minnetoka, MN 55530 952-545-3331 Map   Directions  University of Minneapolis Graduated: 1976 Specialty: Family Practice Disciplinary History Board Certification			***	\$\$
	0.8	7204 W 27 Minnetoka 952-545-3	Carlson, Pamela, MD 7204 W 27th Street Minnetoka, MN 55530 952-545-3331 Map   Directions  University of Illinois Graduated: 1986 Specialty: Family Practice, Rheumatology Disciplinary History Board Certification		Rheumatology	***	\$\$
	2.5	6420 Excel Minneapoli 952-545-3	Fisher, James, MD 6420 Excelsior Blvd Minneapolis, MN 55530 952-545-3331 Map   Directions University of North Carolina Medical School Graduated: 1983 Specialty: Emergency Medicine Disciplinary History Board Certification			**	<b>\$\$\$</b>

#### Council on Technology and Innovation

- Oversees Agency's cross-cutting priority on coordinating coverage, coding and payment processes for new technologies and procedures, including drug therapies
  - Guidance and predictability for product developers
  - Preparing for new technologies
  - Developing Better Evidence for Better Treatment Decisions
  - Coding Reforms

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#### Council on Technology and Innovation

- Agency and CTI Initiatives
  - Personalized Medicine
  - Coverage with Evidence Development
  - HCPCS codes and ICD-10 adoption
  - Clinical Trials
  - Industry Outreach



## Thank you